Amendments to the Claims:

This listing of claims will replace all prior versions, and listings, of claims in the application:

Listing of Claims:

Please cancel claims 1-14 and add the following new claims:

1-14. Cancelled

15. (New) A method for treating haemolytic disease of the newborn, Sezary Syndrome, chronic myeloid leukaemias, chronic lymphoid leukaemias (CLL-B), cancer, breast cancer, conditions related to the the environment in particular affecting people exposed to polychlorinated biphenyls, infectious diseases, in particular tuberculosis, chronic fatigue syndrome (CFS), parasitic infections including schistosomas or paludism, in particular in pregnant women, and viral infections, comprising administering humanised or human chimeric monoclonal antibody of which the glycan structure of the Fc domain of the antibody corresponds to a biantennary type, with short chains, low sialylation, non-intercalating terminal mannoses and GlcNAc of the attachment site, and low fucosylation, to low-responder patients, wherein said low-responder patients are homozygous for phenylalanine in position 158 of CD16 (FCGR3A-158F homozygotes) or heterozygous for valine/phenylalanine in position 158 of CD16 (FCGR3A-158V/F).

16. (New) A method for treating haemolytic disease of the newborn, Sezary Syndrome, chronic myeloid leukaemias, chronic lymphoid leukaemias (CLL-B), cancer, breast cancer, conditions related to the environment in particular affecting people exposed to polychlorinated biphenyls, infectious diseases, in particular tuberculosis, chronic fatigue syndrome (CFS), parasitic infections including schistosomas or paludism, in particular in pregnant women, and viral infections, comprising administering a composition of antibodies wherein antibodies are over 60%, preferably over 80%, for the forms G0 + G1 + G0F + G1F, given that the forms G0F + G1F are lower than 50%, preferably lower than 30%, to patients homozygous for phenylalanine in position 158 of CD16 (FCGR3A-158F homozygotes) or patients heterozygous for valine/pheynylalanine in position 158 of CD16 (FCGR3A-158V/F).

17. (New) The method according to claim 16, wherein patients are homozygous for phenylalanine in position 158 of CD16 (FCGR3A-158F homozygotes).

18. (New) The method according to claim 16, wherein the dose of said antibody administered to the patient is 50 times lower, preferably 100 times lower than a dose of an antibody of the same specificity but of different glycosylation or produced in a CHO line.

19. (New) The method according to claim 16, wherein that the antibody is directed against a non-ubiquitous antigen present in healthy donor cells, in particular an anti-Rhesus of the human red blood cell, or an antigen of a pathological cell or of an organism pathogenic for humans, in particular against an antigen of a cancer cell or infected by a virus.

20. (New) The method according to claim 16 for treating cancers of positive HLA class-II cells, B-cell lymphomas, acute B-cell leukaemias, Burkitt's syndrome, Hodgkin's lymphoma, myeloid leukaemias, chronic B-cell lymphoid leukaemias (CLL-B), non-Hodgkin's T-cell leukaemias and lymphomas and chronic myeloid leukaemias.

21. (New) The method according to claim 16, wherein the antibody is anti-HLA-DR.

22. (New) The method according to claim 16, wherein the antibody is anti-CD20.

23. (New) The method according to claim 15, wherein the antibody is characterised in that the antibody is selected from anti-HLA-DR, anti-CD20, anti Ep-CAM, anti HER2, anti CD52, anti HER1, anti GD3, anti CA125, anti GD, anti GD2, anti CD-23 and anti Protein C; anti-KIR3DL2, anti-EGFR, anti-CD25, anti-CD38, anti-CD30, anti-CD33, anti-CD44, inhibitor-specific anti-idiotypes, for example, coagulation factors, and anti-virals.

24. (New) The method according to claim 16, wherein the antibody is characterised in that the antibody is selected from anti-HLA-DR, anti-CD20, anti EP-CAM, anti HER2, anti CD52, anti HER1, anti GD3, anti CA125, anti GD, anti GD2, anti CD-23 and anti Protein C; anti-KIR3DL2, anti-EGFR, anti-CD25, anti-CD38, anti-CD30, anti-CD33, anti-CD44 inhibitor-specific anti-idiotypes, for example, coagulation factors, and anti virals.